

17497 U.S. PTO
10/64579
08/21/03

PTO/SB/05 (06-03)

Approved for use through 07/31/2003. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonapplications under 37C.F.R. §1.53(b))

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27	8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
3. <input checked="" type="checkbox"/> Specification [Total Pages 24]	a. <input type="checkbox"/> Computer Readable Copy (CRF)
- Descriptive title of the Invention	
- Cross References to Related Applications	
- Statement Regarding Fed sponsored R&D	
- Reference to sequence listing, a table, or a computer program listing appendix	
- Background of the Invention	
- Brief Summary of the Invention	
- Brief Description of the Drawings (if filed)	
- Detailed Description	
- Claim(s)	
- Abstract of the Disclosure	
4. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total sheets _____]	9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))
5. <input checked="" type="checkbox"/> Oath or Declaration [Total pages 1]	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input checked="" type="checkbox"/> Power of Attorney
a. <input checked="" type="checkbox"/> Newly executed (original or copy)	
b. <input type="checkbox"/> Copy from a prior application (37 CFR §1.63(d)) (for continuation/divisional with Box 18 completed)	
i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	
6.. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	11. <input type="checkbox"/> English Translation Document (if applicable)
12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations	
13. <input type="checkbox"/> Preliminary Amendment	
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	
17. <input checked="" type="checkbox"/> Other: This application claims the benefit of U.S. Provisional Application No. 60/423,328 filed November 1, 2002.	

18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37CFR 1.76.

Continuation Divisional Continuation-in-part (CIP) of prior application No: _____ / _____

Prior application information: Examiner _____ Group/Art Unit: _____

For **CONTINUATION OR DIVISIONAL APPS** only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number	28523	<input type="checkbox"/> Correspondence address below	
NAME (Print/type)	Carmella A. O'Gorman	Registration No. (Attorney/Agent)	33,749
Signature	<u>Carmella A. O'Gorman</u>		
Date	8/21/03		

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small status. See 37 CFR 1.27

Total Amount of Payment (\$750.00)

METHOD OF PAYMENT (check all that apply)

 Check Credit Card Money Other None
Order Deposit Account:Deposit Account Number
Deposit Account Name16-1445
Pfizer Inc

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	750	2001	375	Utility filing fee	750
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	filin fee	

Subtotal (1) \$ 750

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

	Extra Claims	Fee from below	Fee Paid
Total Claims	6 - 20 = 0	x 18 = 0	
Independent Claims	3 - 3 = 0	x 84 = 0	
Multiple Dependent		280 = 0	

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue independent claims over original patent

SUBTOTAL (2) (\$ 0)

FEE CALCULATION (continued)

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1255	1,970	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive unavoidable	
1453	1,300	2453	650	Petition to revive – unintentional	
1501	1,300	2501	650	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	630	2503	315	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Petitions to the Commissioner	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	750	2810	375	For each additional invention to be examined (37 CFR 1.129(b))	
1801	750	2810	375	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	
1802	900	1802	900	Request for expedited examination of a design application	
Other Fee (specify)					

*Reduced by Basic Filing Fee Paid

Subtotal (3) (\$ 0)

(Complete if applicable)

Name (Printed/Type)	Carmella A. O'Gorman	Registration No. (Attorney Agent)	33,749	Telephone	860-686-1847
Signature	Carmella A. O'Gorman			Date	8/21/03

Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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